FORM D

BEST AVAILABLE COPY

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR OPM LIMITED OFFERING EXEMPTI

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OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ige burden
hours per respo	nse16.00

SEC USE ONLY				
Prefix	Serial			
DATE	RECEIVED			

UNIFORM LIMITED OFFERING EXEM	PTION	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) 12% Secured Subordinated Debentures		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	☐ ULOE	
Type of Filing: New Filing Amendment		RECEIVED CONTROL
A. BASIC IDENTIFICATION DATA	// NOV	0 à 2004
1. Enter the information requested about the issuer		V 2 2001
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Bench Dog, Inc.	FEE	179
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (In	ncluding Area Code)
3310 NE 5th Street, Suite 100, Minneapolis, MN 55418	(800) 786-8902	\ <u>'</u>
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (I	ncluding Area Code)
Brief Description of Business		
Manufactures router tables, power tools, carpentry and building tools		
Type of Business Organization		PROGESSZI
	lease specify):	
business trust limited partnership, to be formed		NOV 0 8 2004
Month Year Actual or Estimated Date of Incorporation or Organization: 09997 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated	Tronson Financial
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (77d(6).	or Section 4(6), 17 CFR 23	0.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.		
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuall photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not	manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously supposed by filed with the SEC.		

Filing Fee: There is no federal filing fee.

State

SEC 1972 (6-02)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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1 of 8

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Slatter, Karen Business or Residence Address (Number and Street, City, State, Zip Code) 3310 NE 5th Street, Suite 100, Minneapolis, MN 55418 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Fontaine, Norston Business or Residence Address (Number and Street, City, State, Zip Code) 3310 NE 5th Street, Suite 100, Minneapolis, MN 55418 Promoter Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Smith, Clifford Business or Residence Address (Number and Street, City, State, Zip Code) 3310 NE 5th Street, Suite 100, Minneapolis, MN 55418 ☐ Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Anderson, Keith Business or Residence Address (Number and Street, City, State, Zip Code) 3310 NE 5th Street, Suite 100, Minneapolis, MN 55418 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Schabel, Tom Business or Residence Address (Number and Street, City, State, Zip Code) 3310 NE 5th Street, Suite 100, Minneapolis, MN 55418 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

34%				В. П	NFORMAT	ION ABOU	T OFFERI	NG	Pagara.			
1. Has t	ne issuer solo	1 or does th	ne issuer ir	itend to se	ll to non-a	ccredited i	nvestors in	this offeri	na?		Yes	No
1. 1145 ti	ic issuel son	i, or does n			Appendix					••••••	X	
2. What	is the minim	um investm					-				s N/A	
2. 77 1141	is the militin	am mvesm	10111 11141 11	in oc acce	pica nom i	iny marvia		•••••••		•••••	Yes	No
3. Does	the offering	permit join	t ownershi	p of a sing	le unit?						×	
comm If a pe or sta	the informat dission or sime erson to be list tes, list the na ter or dealer,	ilar remune ted is an ass ame of the b	ration for s sociated pe roker or de	solicitation rson or age caler. If mo	of purchasent of a broker ore than five	ers in conne cer or deale e (5) person	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t EC and/or	he offering. with a state		
Full Name	(Last name	first, if indi	ividual)									
Business of	r Residence	Address (N	iumber and	l Street, Ci	ity, State, Z	Lip Code)						
Name of A	ssociated Br	oker or De	aler									
States in V	Vhich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					<u> </u>	
(Chec	k "All States	s" or check	individual	States)								States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
	(Last name or Residence			d Street, C	ity, State,	Zip Code)						
Name of A	Associated Bi	roker or De	aler									
States in V	Which Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	k "All State											States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)									1,011,0,0,0,101,000
Business	or Residence	Address (I	Number an	d Street, C	City, State,	Zip Code)						
Name of A	Associated B	roker or De	aler									
States in V	Which Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Che	ck "All State	s" or check	individua	l States)	••••••••	······	•••••				☐ Al	States
AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange of this box and indicate in the columns below the amounts of the securities offered for ealready exchanged.	exchange and	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u>750,000.00</u>	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	<u>\$ 750,000.00</u>	<u>\$ 0.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securifiering and the aggregate dollar amounts of their purchases. For offerings under Rule the number of persons who have purchased securities and the aggregate dollar amount purchases on the total lines. Enter "0" if answer is "none" or "zero."	504, indicate	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$ 372,700.00
	Non-accredited Investors		§ 8,333.33
	Total (for filings under Rule 504 only)		\$ 381,033.33
	Answer also in Appendix, Column 4, if filing under ULOE.		T
3.	**	s prior to the	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Not applicable	<u>\$ 0.00</u>
	Regulation A	Not applicable	\$ 0.00
	Rule 504	Not applicable	<u>\$ 0.00</u>
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribusecurities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an enot known, furnish an estimate and check the box to the left of the estimate.	bution of the of the insurer.	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 50,000.00
	Accounting Fees	_	\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Processing Fee	_	\$ 15,000.00
		_	

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS'	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>\$ 685,000.00</u>
•	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees]\$	\$
	Purchase of real estate] \$	\$
	Purchase, rental or leasing and installation of machinery and equipment	ר\$	¬ \$
	Construction or leasing of plant buildings and facilities	_	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness		
	Working capital		_
		」♥ ᄀ\$	
		-	
	Column Totals		\$ 685,000.00
	Total Payments Listed (column totals added)		5,000.00
	D. FEDERAL SIGNATURE		

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature Date
Bench Dog, Inc.	November 2, 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Karen Slatter	President

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)